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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator Rincon Operating Company	
Address 1580 Lincoln St. #700 Denver, CO 80203	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	add
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Ute Dome	Well No. 1	Pool Name, Including Formation Paradox	Kind of Lease State, Federal or Fee Fed	Lease No. 0101125-H
Location Unit Letter J ; 2130 Feet From The East Line and 2247 Feet From The South				
Line of Section 19 Township 32N Range 13W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Box 1528 Denver, CO 80201	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) PO Box 990 Farmington, NM 87401	
El Paso Natural Gas Company		
If well produces oil or liquids, give location of tanks.	Unit 19	Sec. 32
	Twp. 13	Rge. 13
	Is gas actually connected? yes	When 9/13/81

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Rest'v.
		X	X					
Date Spudded 4/30/79	Date Compl. Ready to Prod. 10/23/79	Total Depth 9580'	P.B.T.D. 8958					
Elevations (DF, RKB, RT, GR, etc.) 6422 GR	Name of Producing Formation	Top Oil/Gas Pay 8047'	Tubing Depth 8002					
Perforations 8047-8811'	Depth Casing Shoe 9580							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
14 1/2"	10-3/4"	710	700					
7-7/8"	5 1/2"	9580	600					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 3750	Length of Test 24	Bbls. Condensate/MCF 12.8	Gravity of Condensate 50
Testing Method (pitot, back pr.) Back pres	Tubing Pressure (shut-in) 3200	Casing Pressure (shut-in) 0	Choke Size 25/64"

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Manager of Drilling & Production

September 3, 1981

OIL CONSERVATION COMMISSION
APPROVED
BY Original Signed by FRANK T. CHAVEZ
TITLE SUPERVISOR, DISTRICT 3, SANTA FE

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.